

## **Campaign Finance Disclosure Statement**

## State of South Dakota



County, municipal and school candidates file in the office where you filed your nominating petition. Statewide PACs, political party, ballot question and other committees file statement with the Secretary of State's Office.

Mail to Secretary of State's Office, Election Department, 500 E Capitol Ave., Ste. 204, Pierre, SD 57501-5070 Fax to 605-773-6580 or email to <a href="mailto:kea.warne@state.sd.us">kea.warne@state.sd.us</a> Fax and email images must contain the signature
and the original must be filed in our office within one week following the date the fax/email was received.
Check here if you are a legislative candidate filing a pre-primary or pre-general report and received and
spent less than \$10,000. If so, you only need to complete pages 1 & lines 2 & 7 of page 8 of this report.
***************************************
See pages 9 & 10 of the Guideline Book for specific instructions on completing this report.
Name of Committee South Dakota Medical Group Management Association PAC
Complete Street and Postal Address 2600 West 49th Street, Suite 200, Sioux Falls, SD 57105
Name of Person Making Report Bruce Hanson
Daytime Phone Number (605) 336-1965 Evening Phone Number
Email Addressbhanson@dakotacare.com
f you are a candidate, what office are you seeking? N/A
f you are a ballot question committee, indicate which measure(s) the committee was involved with during the
eporting period and whether the measure was supported or opposed.
N/3
N/A Filed this Ob
'yee of Campaign Statement Voor End
re-election, year-end, mid-year (mid-year for ballot questions committees only); after the supplement or
ermination Chro TOE STATE
ermination  SECRETARY OF STATE
he following verification must be completed before submitting report.
ERIFICATION OF PERSON MAKING REPORT
Scott Lunzman (print name legibly), certify that I have examined
is report and to the best of my knowledge and belief it is true, correct and complete. I also understand that
ilure to timely file any statement, amendment, or correction required subjects the treasurer responsible for
ling to a civil penalty of fifty dollars per day for each day that the statement remains delinquent.
ate: 2-14-2008 Sell Lungman
Signature of Treasurer

d 7-1-07

#### Schedule A – Direct Contributions

This schedule is used for reporting all direct contributions. You must keep a record of all contributors, but for this report you may combine all contributions of \$100 or less from individuals and enter this sum as unitemized contributions on the first line below. Any contribution of more than \$100 or aggregate during a calendar year from an individual and all contributions from political parties and PAC's must be entered as a separate item (itemized) giving the amount, name, residence address, city and state of the contributor. Any contribution from a federal political committee or political committee organized outside this state shall also include the name and internet website address of the filing office where the committee regularly files. Each type of contributor has their own section for itemization. This schedule may be duplicated if you need more space or you may attach additional sheets of paper.

Itemized Contributions from Indiv	iduala			
temized Contributions from Individuals				
Name	Residence Address			
Michael McHale, M.D.	Sioux Falls, SD	\$ 250.00.		
David Flicek	Sioux Falls, SD	\$ 250.00		
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Total of Itemized Contributions		\$ *\$ 500.00		

# Schedule A – Direct Contributions (continued)

mized Contributions from Political Parties		
Party Name	Address	
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al of Itemized Contributions from Political Parties:		*\$
nized Contributions from South Dakota Political Ac	tion Committees (BAC2s) on Courth Ph	alvata Camilidata Camunitta
tributions must be itemized.	non Committees (PAC-8) of South Da	akota Candidate Committees -
PAC Name	Address	
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#### Appendix B

### Schedule A- Direct Contributions (continued)

Itemized Contributions from Federal Political Action Committees or Political Action Committees (PACS) and Candidate Committees organized outside this state. All contributions from Federal or out-of-state PAC's must be itemized and include the PAC name and internet website address of the filing office where the committee regularly files their campaign finance report.

PAC Name	Internet Website Address	
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of Itemized Contributions from Out of State and Fe	deral Political Action Committees:	*\$
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#### Schedule B - In Kind Contributions

Report all non-cash contributions of goods or services and the estimated fair market value. If the contribution is from a federal political committee or political committee organized outside this state list the name and internet website address of the filing office where the committee regularly files their campaign finance report.

Description of Non-Cash Contribution	Name and Residence Address or Name and Internet Website Address	Estimated Value
	<b>*</b>	
Total:		<b>-</b> 0-

#### Schedule C - Other Income

Use this schedule to report any refunds, rebates, interest earned, sale of property, or other income which is not a direct contribution.

Source of Income	Description of Income	Amount
· · · · · · · · · · · · · · · · · · ·		
Total:		

Schedule D - Establishing and Administration of Committee/Solicitation Costs
List a categorical description and the estimated value of funds or donations by any organization to its political
committee for establishing and administering the political committee or solicitation costs of the political
committee.

Organization Name & Categorical Description for direct funds	Estimated Value
	· ·
	<u> </u>
Total:	

## Schedule E – Expenditures

This schedule is to report all expenditures relating to a candidate's campaign. Categories have been provided for reporting common expenses. All other expenses should be listed. All contributions to candidates and committees must be listed individually.

Expenses		Contributions Made to Candidates and Comm	ittees	
Item	Amount	Name of Candidate or Committee and Adress	Amount	
Advertising				
Consulting				
Intérest				
Postage				
Printing				
Rent				
Salaries				
Telephone			, , , , , , , , , , , , , , , , , , ,	
Travel				
<u>Utilities</u>				
List other expense	List other expense			
items below	amounts below			
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Total Expenditures:			_0-	

## Schedule F - Debts and Obligations Owed by Committee

This schedule is to report all of the committee's obligations which are incurred but unpaid at the end of the reporting period. If a service has been contracted but not billed, estimate the amount of the obligation. You must include the terms, interest rate and repayment schedule of each loan and the nature of each obligation.

Owed to - Lender's Name	Nature of Oblication or Terms of Loan	Street Address, City and State	Amount
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al Debt Owed by Committee		<u> </u>	-0-

#### Schedule G – Loans Owed to Committee

This schedule is to report the amount of each loan owed to the political committee or political party. The amount of each loan made during the reporting period and the balance of each loan owed to the committee at the end of the reporting period must be itemized.

Name of Recipient of Loan, Street Address, City and State	Amount of Loan Made During the Reporting Period	Amount of Loan Repaid During the Reporting Period	Balance of Loan at the End of the Reporting Period
Totals	-0-	-0-	-0-

**Summary Page** 

This summary sheet will give a brief outline of all campaign finance activity during this reporting period. Please transfer all totals from the schedules previously completed.

	Balance of cash and cash equivalents on hand, if any, at the beginning of the reporting period:	<b>\$</b> _1,342.50
2.	Receipts	•
	Schedule A - Direct Contributions \$ 11370 \\ Schedule B - In-Kind Contributions \$ \( \frac{1}{370.00} \)	
	Schedule B - In-Kind Contributions \$ 1,370.00	
	Schedule C – Other Income \$	
	Schedule D - Establishing/Administration of Committee \$	·
	Total of all Receipts \$	
3.	Total Monetary Receipts (A+C)	\$ 1,370.00
4.	Candidate's Personal Contribution to Own Campaign	\$
5.	Monetary Loans to Candidate or Committee During Reporting Period	\$
6.	Monetary Loans Repaid During Reporting Period	\$
7.	Expenditures - Schedule E	\$
8.	Debts & Obligations Owed by the Committee - Schedule F \$	
9.	Monetary Loans Made by the Committee During the Reporting Period – Schedule G	\$
10.	Monetary Loans Repaid to the Committee During the Reporting Period – Schedule G	\$
11.	Amount on hand at the close of this reporting period.  This should equal lines (1+3+4+5) - (6+7+9)	<b>*\$</b> <u>2,712.50</u>

\*Note: You cannot end the reporting period with a negative balance.

If you are a ballot question committee which received a contribution from an organization, please attach to this campaign finance disclosure statement, the Ballot Question Statement you received from the organization.



Corporation Information System - Chris Nelson, Secretary of State - Chad Heinrich, Deputy

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## **Corporations Division**

If no date is displayed in the 'Last Annual Report' column, you must check the 'Date of Incorporation' Column. Organizations which show 'delinquent' in the status column, are either not in good standing or have yet to be processed by our office. If an organization shows as 'delinquent' or you are unable to locate the organization you are seeking, please contact our Corporations Division at (605) 773-4845.

1 Records Found

Click here for Corporate Forms

		<u>Date of</u>
Corporation Name		Org ID Number Incorporation Annual To Status
		/Qualification Report Type
		<u> </u>
SOUTH DAKOTA MEDICAL	. GROUP MANAGEMENT	NS009503 10/22/1991 12/04/2006 Inc Delinquent
ASSOCIATION		NS009503 10/22/1991 12/04/2006 Inc Delinquent

Corporations with the 'NS' prefix (non-profit) or the 'CH' prefix (domestic churches) were required to file a report every third year (1990, 1993, 1996, 1999, 2002). Starting in 2004, these corporations were required to report annually.